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DATE: 8 September 2003 TOTAL NUMBER OF PAGES (INCLUDING THIS COVER) 9

TO: Examiner Lynda C. JASMIN FAX NO.: (703) 872-9327 and  
Art Unit 3627 (703) 305-7687

FIRM NAME: Mail Stop AF TELEPHONE NO.: (703) 308-5183  
Commissioner for Patents

ADDRESS: P.O. Box 1450  
Alexandria, Virginia 22313-1450

FROM: Michael A. KAUFMAN - Reg. No. 32,998 FAX NO.: (415) 398-3249

E-MAIL: kaufman.michael@dorseylaw.com TELEPHONE NO.: (415) 544-7062 direct or  
(415) 781-1989 main

## COMMENTS:

Re: U.S. Patent Application  
Serial No.: 09/480,883 ✓  
Filing Date: 10 January 2000  
Inventors: Scott T. ALLAN, et al.  
Title: *Electronic Receipts Service*  
Docket No.: A-65188-1/MAK

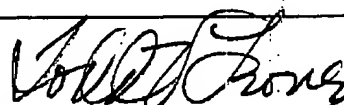
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Please see attached items, namely:

- ① Petition for Extension of Time (2 months) with deposit account debit authorization; and
- ② After-Final Amendment

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PLEASE CONTACT Todd V. Leone AT (415) 544-7018

IF THIS TRANSMISSION IS INCOMPLETE OR CANNOT BE READ.

Reference No.: 2817 467766-00094

SF-1119337v1

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Scott T. ALLAN, et al.File No.: A-65188-1/MAKSerial No.: 09/480.883Examiner: Lynda C. JASMINFiling Date: 10 January 2000Group Art Unit: 3627For: Electronic-Receipts Service

I hereby certify that this correspondence is being transmitted via facsimile to the Commissioner for Patents at USPTO Fax No. (703) 872-9327 and (703) 305-7687 on 8 September 2003.

Signed: \_\_\_\_\_

Todd V. LEONE

## PETITION FOR EXTENSION OF TIME

Mail Stop AF  
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Sir:

Pursuant to 37 C.F.R. 1.136(a), an extension of time of:

	Large Entity	Small Entity
One Month: [ ]	\$ 110.00	[ ] \$ 55.00
Two Months: [✓]	\$ 410.00	[ ] \$ 205.00
Three Months: [ ]	\$ 930.00	[ ] \$ 465.00
Four Months: [ ]	\$ 1,450.00	[ ] \$ 725.00
Five Months: [ ]	\$ 1,970.00	[ ] \$ 985.00

is hereby requested to

- [✓] respond to the Official Action mailed 7 April 2003  
[ ] file a Notice of Appeal in response to a final rejection mailed \_\_\_\_\_  
[ ] file an Appeal Brief now due \_\_\_\_\_  
[ ] other (specify): \_\_\_\_\_

The requisite fee pursuant to 37 C.F.R. 1.17 is:

- [ ] enclosed by Check No. \_\_\_\_\_  
[✓] to be charged to Deposit Account No. 50-2319 (Order No. 467766-00094 [A-65188-1/MAK]). A duplicate copy of this sheet is enclosed.  
[✓] Please charge any additional fees or credit any overpayment to Deposit Account No. 50-2319 (Order No. 467766-00094 [A-65188-1/MAK]).

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Respectfully submitted,  
DORSEY & WHITNEY LLP

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Date: 8 September 2003By: Michael A. Kaufman

Michael A. KAUFMAN

Reg. No. 32,998

Filed under 37 C.F.R. § 1.34(a)

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[467766-00094]